

CURRICULUM VITAE (updated 16-08-2020)

NAME: David Sydney Halpin MB BS FRCS

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SECONDARY EDUCATION: Shaftesbury Grammar School, Shaftesbury, Dorset

UNDERGRADUATE MEDICAL EDUCATION: 1958 – 1964: St. Mary’s Hospital Medical School W.2
MB BS London 1964

PRE-REGISTRATION APPOINTMENTS: House Physician to Professor Peart Medical Unit St. Mary’s Hospital
House Surgeon to Mr. John Stephen at St. Mary’s Hospital, W.9

POST-REGISTRATION APPOINTMENTS: Casualty Officer at St. Mary’s W9 1965
Demonstrator in Anatomy at King’s College, London
Primary FRCS England, 1967

1967 – 1969: Surgical rotation centred on Bristol Royal Infirmary
Final FRCS, England, 1969

1969 – 1970: Registrar in General Surgery, Royal Devon & Exeter Hospital, Exeter.

1970 – 1975: Specialist training in orthopaedic and trauma surgery at Princess Elizabeth Orthopaedic Hospital, Exeter. Royal Devon & Exeter Hospital. Royal Cornwall Hospital, Truro, and including six months in the Orthopaedic Department of the Massachusetts General Hospital under Professor Mankin. Research in cartilage metabolism and ‘cysts’ in osteoarthritis, teaching undergraduates and clinical work/discussion.

Certificate for completion in the training required, both in surgery in general, and in the specialty of orthopaedics - 31st July 1975, Royal College of Surgeons of England.

1975: Appointed Consultant in Orthopaedic and Trauma Surgery at Torbay Hospital, and at Princess Elizabeth Orthopaedic Hospital, Exeter. I was responsible in the first eight years, along with one colleague, for the orthopaedic and trauma care of a resident population of over 160,000 people, as well as a large summer holiday population. I developed a particular interest in spinal surgery, in the care and surgery of those with rheumatoid arthritis, and in foot surgery. I cared for most of those children in the district who had orthopaedic conditions, and I have a special interest in ‘paediatric orthopaedics’. I have had the privilege of helping to train many young surgeons and nurses over the years, and I have a love of teaching. I have published scientific papers, and ran several scientific meetings. My “academic” qualities were recognised by my appointment to the Editorial Board of “The Journal of Bone and Joint Surgery” 1986 – 1990.

I retired early on health grounds in 1993 from my posts in Torquay and Exeter, but then served part-time in various and useful ways:-

1. Long-term locum Consultant in Orthopaedic Surgery at the Princess Elizabeth Orthopaedic Centre, Royal Devon & Exeter Hospital, Wonford
2. Providing orthopaedic medical clinics in general practice.

3. Providing medical reports to solicitors and insurance companies regarding injuries
4. Medical membership of the Independent Tribunal Service – resigned on a matter of principle in 1999. A ‘tribunal’ became a solicitor chairman and a single doctor
5. Private orthopaedic practice
6. Teaching orthopaedic trainees – honorary work – ceased since beds for non-urgent orthopaedic surgery became very scarce.

Retired from all orthopaedic work in 2005 but never stopped thinking about it, as well as trauma surgery and medicine in general.

Personal Qualities Which I Believe I Have: Special Interests

1. Even-handedness.
 2. An analytical mind. I get to the nub of the problem as well as I can. I believe there is clarity in the conclusions that I make and the opinions that I give.
 3. A particular interest in the injured and in their rehabilitation. The value of first-class rehabilitation centres has been known to me since my time as a Senior Registrar in training. The scarcity of such centres is of great concern to me, and I tried stimulating some action by Government. (eg via Mr Frank Field MP – then a Minister of Health I believe). I brought to him and others the idea of centres for urgent diagnosis and rapid treatment of those people of working age who could not return to work after an injury or acute illness. I had seen too many patients who were off work and waiting for diagnosis and relief, with mortgage debts etc mounting. eg A locked knee from a bucket handle tear of a meniscus – a simple example.
 4. Chronic pain or disability. I saw severe rheumatoid arthritis in my mother (myself the eldest of four). This gave me greater insight into those suffering joint disease; my colleague in rheumatology, Dr Richard Jacoby, referred a majority of his patients requiring surgery to me. Some of these patients had very severe disabilities.
- I took more than my full share of patients with spinal pathology expressed as back pain, sciatica, ‘spinal claudication’ and occasional acute cauda equina compression.

Interests and hobbies

I have planted and continue to nurture woodlands, having 32 acres in all of great beauty. I have skilled help in this.

Gardening, including propagation. We have a large garden here on the southern edge of Dartmoor where Sue and I moved in 2000. It becomes more beautiful by the year. A third of it has wild grasses and flowers, with a wild life and lily pond.

Drawing, pen and wash – very occasionally, but a gentle way of expressing art in oneself

Dartmoor.

Listening to music and previously supporting the Ten Tors Orchestra.

Rural crafts – hedge steeping, hay rake-making and besom making.

Family – our adopted son Andrew, with Rachel his wife and their three daughters. Our adopted daughter Fiona who is a carer and care supervisor.

Our country of Britain and our world.

Characteristics that might make me fit to serve as a ‘political’ member:-

Positive

1. A love of medicine and traditional clinical medicine, especially the art of history taking and of examination.
2. An interest in all people in every job, including those who are most disadvantaged. For instance, and as above, my interest in the rehabilitation of people of working age who suffer injury or disease; they continue to be poorly served.
3. A continued interest in the generality of medicine and a high regard for its fascination and power for good.
4. An abiding interest in basic science as well as its application within the musculo-skeletal system.
5. A broad and deep experience as an orthopaedic and trauma surgeon.
6. Some humility arising in part from my own illness. The latter has given me some insight into how doctors can help preserve their own health and how the Service could care better for their staff.

Negative

1. I set exacting standards for myself and my firms. I have no apology for this; it is a prerequisite for confirming the indications for surgery, and for a successful outcome. It means, however, that I might have tested others and certainly myself as well.
2. I am single-minded in any task. I concentrate on the essential issues. In this and in many other things, I have the support of a very good wife who has the advantages of having been trained in orthopaedic and general nursing, and in secretarial skills!

Conclusion

I am fortunate to have been inspired by teachers such as the late Professor W. S. Peart, F. C. Durbin FRCS (obit attached) and R.S.M.Ling https://www.exeter.ac.uk/news/staff/title_614816_en.html . I had hoped that at age 55 or thereabouts, I could spend more time in teaching and learning. As specialist departments become bigger, and possibly more mechanistic, there is a place for more thought before process aided by older colleagues who have had a deep experience in their fields.

David S. Halpin MB BS FRCS